

PART B - FEE(S) TRANSMITTAL

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23628 7590 04/09/2004
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BOSTON, MA 02210-2211



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Melissa L. B. Lyons	(Depositor's name)
<i>Melissa L. B. Lyons</i>	(Signature)
<i>July 7, 2004</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/849,602	05/04/2001	Yao-Tseng Chen	L0461/7105(JRV/MXA)	8884

TITLE OF INVENTION: COLON CANCER ANTIGEN PANEL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	07/09/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
LY, CHEYNE D		1631	536-023100		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Wolf, Greenfield

2 & Sacks, P.C.

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Ludwig Institute for Cancer Research

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

New York, NY

Cornell Research Foundation, Inc.

Ithaca, NY

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee

Advance Order - # of Copies _____

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A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 2372825 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

Helen C. Lockhart

(Authorized Signature)

(Date)

Helen C. Lockhart July 7, 2004

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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07/14/2004 MBERHE1 00000041 09849602

01 FC:1501
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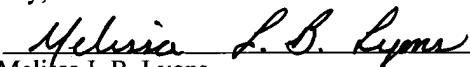
DOCKET NO.: L0461.70105US00

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Yao-Tseng Chen et al.
Serial No: 09/849,602
Confirmation. No.: 8884
Filed: May 4, 2001
For: COLON CANCER ANTIGEN PANEL
Examiner: Cheyne D. Ly
Art Unit: 1631

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

The undersigned hereby certifies that this document is being placed in the United States mail with first-class postage attached, addressed to MAIL STOP Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the 7th day of July, 2004.


Melissa L.B. Lyons

Mail Stop Issue Fee
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith are the following documents:

Part B - Issue Fee Transmittal
 Return Receipt Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 720-3500, Boston, Massachusetts.

A check in the amount of \$1630.00 is enclosed to cover the issue fee and the publication fee. If the fee is insufficient, the balance may be charged to Deposit Account 23/2825. A duplicate of this sheet is enclosed.

Respectfully submitted,
Yao-Tseng Chen et al., Applicant

By: 
Helen C. Lockhart, Ph.D, Reg. No. 39,248
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Docket No. L0461.70105US00

Date: July 7, 2004

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